

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	51		5-17-01
O.I.P.E. CLASSIFIER		8	5-17-01
FORMALITY REVIEW	MD	577	6/25/01
RESPONSE FORMALITY REVIEW	Request #5	925	09-11-01
"		866	10-25-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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4-5
6-25-01
8-25-01
10-25-01